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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.3)</b>	Attorney Docket Number	438701/004
	First Named Inventor	Stephen S. Miller
	<i>COMPLETE IF KNOWN</i>	
	Application Number	New Application
	Filing Date	Herewith
	Group Art Unit	
	Examiner Name	
<input checked="" type="checkbox"/> Declaration Submitted with initial Filing      OR <input type="checkbox"/> Declaration Submitted After initial Filing (surcharge (37 CFR 1.6(e)) required)		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS AND METHOD FOR EFFECTING CORRESPONDENT-CENTRIC  
ELECTRONIC MAIL

the specification of which

☒ is attached hereto (Title of the Invention)  
OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

Burdent Hour Statement: This form is estimated take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENT TO: Assistant commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside box → ☒

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

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## DECLARATION – Utility or Design Patent ☐ Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US98/14886	07/18/1998	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number  →

OR

☒ Registered practitioner(s) name/registration number listed below.

Name	Registration Number	Name	Registration Number
Lawrence Rosenthal	24,377		
Steven B. Pokotilow	26,405		
Howard M. Gitten	32,138		
Matthew W. Siegal	32,941		

☐ Additional registered practitioner(s) named on supplemental registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to : ☐ Customer Number  ☐ Correspondence address below or Bar Code Label

Name	STROOCK & STROOCK & LAVAN LLP				
Address	180 Maiden lane				
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Country	US	Telephone	(212) 806-5400	Fax	(212) 806-6006

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Stephen S.	Miller

Inventor's Signature						Date	
Residence: City	New York	State	New York	Country	US	Citizenship	US
Post Office Address	8 Gramercy Park South, Apt. 6K						
City	New York	State	New York	Zip	10003	Country	US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside box → ☒

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page of
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Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name(first and middle [if any])						Family Name or Surname	
Mohammed S.						Shaan	
Inventor's Signature						Date	
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City	Kearny	State	NJ	ZIP	07032	Country	US
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name(first and middle [if any])						Family Name or Surname	
Lewis Edward						Ross	
Inventor's Signature						Date	
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Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name(first and middle [if any])						Family Name or Surname	
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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